



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E262586**

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

CASE # **13-01925**

LOCAL AGENCY CODING

TOTAL # OF UNITS **02** OBJECT STRUCK

TRIBAL RESERVATION

DATE OF COLLISION **08** - **05** - **2013** TIME (2400) **1140** COUNTY # **31** MILES **0664** CITY # **0664**

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☒ NON-INTERSECTION ☐

20TH ST SE BLOCK NO. MILE POST

DISTANCE OF (REFERENCE OR CROSS STREET) **S. LAKE STEVENS RD**

UNIT 01 MOTOR VEHICLE ☒ PEDAL CYCLE ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE **D: 5402450945**

LAST NAME **MORSE** FIRST NAME **DOLORES** MIDDLE INITIAL **S**

STREET NEW ADDRESS **2916 157TH AVE SE**

CITY **SNOHOMISH** ST **WA** ZIP **982909700**

CDL RESTRICTIONS **B** ENDORSEMENTS

DRIVER'S LICENSE # **MORSEDS527JC** STATE **WA** SEX **F** D.O.B. **04** - **03** - **1948**

ON DUTY ☐ STATUS **AIRBAG 2** **RESTR 4** **EJECT 1** **HELMET USE** **INJURY CLASS 1** NATURE OF INJURIES

LICENSE PLATE # **AKG1014** STATE **WA** VIN# **2HKRL1867YH529246**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2000** MAKE **HOND** MODEL **ODYSSE** STYLE **VN** VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **HOWARD MORSE 1717 WEAVER WAY SNOHOMISH WA 98290**

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **HARTFORD CASUALTY INSURANCE 55 PHK985652-248217**

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGE

UNIT 02 MOTOR VEHICLE ☒ PEDAL CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE

LAST NAME **STONER** FIRST NAME **MAXWELL** MIDDLE INITIAL **L**

STREET NEW ADDRESS **8501 WILLOWS RD NE APT E225**

CITY **REDMOND** ST **WA** ZIP **980523465**

CDL RESTRICTIONS **B** ENDORSEMENTS **L**

DRIVER'S LICENSE # **STONEML137JB** STATE **WA** SEX **M** D.O.B. **04** - **02** - **1987**

ON DUTY ☐ STATUS **AIRBAG 1** **RESTR 1** **EJECT 1** **HELMET USE 1** **INJURY CLASS 6** NATURE OF INJURIES **ABRASIONS TO RIGHT KNEE**

LICENSE PLATE # **1C8411** STATE **WA** VIN# **1HFSC1806GA103363**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **1986** MAKE **HOND** MODEL **VT1100C** STYLE **MC** VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **ERIC HENDRICKS 1018 9TH AVE SEATTLE WA 98104**

LIABILITY INSURANCE IN EFFECT ☐ INSURANCE CO & POLICY #

VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGE

OFFICER'S NAME (PRINT) **DENNIS IRWIN** BADGE OR ID # **105** AGENCY **WA0311900**



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E262586**

CASE # **13-01925**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)																		
NAME (LAST, FIRST, MIDDLE INITIAL)		SPECHT JOAN I																
ADDRESS & PHONE #		2916 157TH AVE SE SNOHOMISH WA 98290				SEX	F	D.O.B. MMDDYYYY	07	04	1929							
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	1	SEAT POS	3	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	<input type="checkbox"/>	INJURY CLASS	1	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)		WALTON MOLLY K																
ADDRESS & PHONE #		2916 157TH AVE SE SNOHOMISH WA 98290				SEX	F	D.O.B. MMDDYYYY	02	03	1999							
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	1	SEAT POS	7	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE	<input type="checkbox"/>	INJURY CLASS	1	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)		DURAND KEVIN P																
ADDRESS & PHONE #		423 103RD AVE NE LAKE STEVENS WA 98258 2089621335				SEX	M	D.O.B. MMDDYYYY	01	18	1977							
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS		AIRBAG		RESTR.		EJECT		HELMET USE	<input type="checkbox"/>	INJURY CLASS		NATURE OF INJURIES

NARRATIVE

UNIT #2 was west bound on 20th St SE in the inside lane on a green light. Another vehicle was also westbound on 20th St SE in the turn lane next to UNIT #2 and was making a left turn.

UNIT #1 was stopped on southbound on S. Lake Stevens Rd at the intersection of 20th St SE. UNIT #1 did not notice UNIT #2 entering the intersection and proceeded to make a wide right turn onto 20th St SE. UNIT #1 collided with UNIT #2 causing UNIT #2 and the driver to fall to the side and slide along the blacktop.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

DENNIS IRWIN

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

08-09-13 11:46 AM

DATED

PLACE SIGNED

APPROVED BY

ROBERT MINER 095

DATE

8/12/2013 3:14:33 AM

BADGE OR ID # **105**

ORI #

WA0311900

TIME POLICE DISPATCHED

11:41 AM

TIME POLICE ARRIVED

11:42 AM



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E262586**

CASE # **13-01925**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		MILLER ERIN M																	
ADDRESS & PHONE #		20225 BOTHELL EVERETT HWY #738 BOTHELL WA 98012 4252202564																	
SEX		F		D.O.B.		MMDDYYYY		06		- 25 - 1985									
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #																			
SEX				D.O.B.		MMDDYYYY				- - -									
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #																			
SEX				D.O.B.		MMDDYYYY				- - -									
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	

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UNIT OR DIST. DET

08-09-13 11:46 AM

DATED

PLACE SIGNED

APPROVED BY

ROBERT MINER 095

DATE

8/12/2013 3:14:33 AM

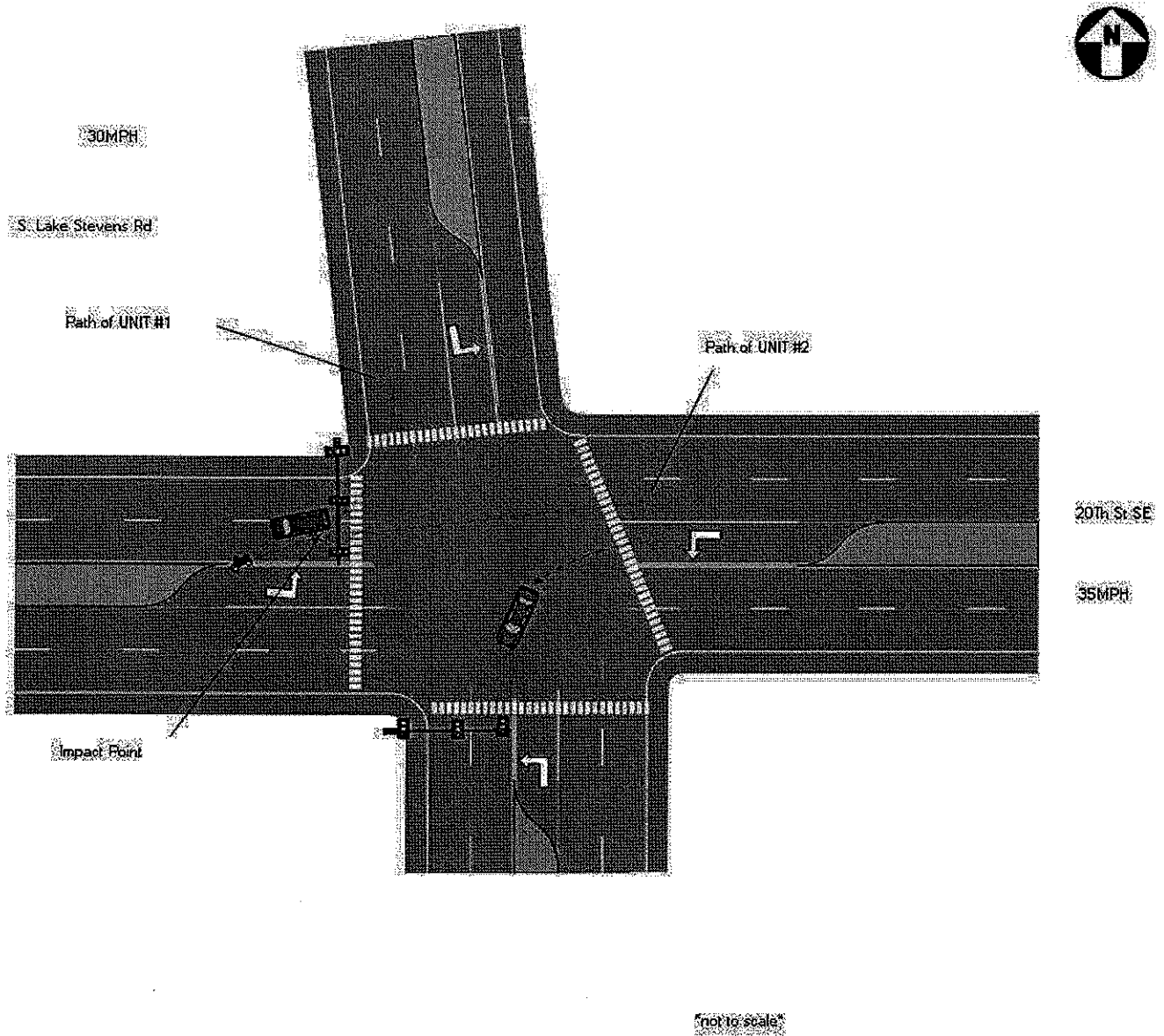
BADGE OR ID # **105**

ORI #

WA0311900

TIME POLICE DISPATCHED **11:41 AM**

TIME POLICE ARRIVED **11:42 AM**



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

13-01925

VICTIM / WITNESS

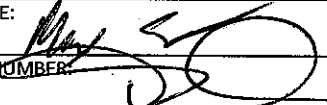
NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Stoner, Maxwell Lee	RACE	ETH	SEX M	DOB 04/02/1987	AGE 26	HGT 6'2"	WGT 205	HAIR Blk	EYES Hzi
STREET ADDRESS 11714 24 Ave		CITY Lake Stevens		STATE WA		ZIP 98258		RES. STATUS		
HOME PHONE (206) 643-0072		CELL PHONE same		PLACE OF EMPLOYMENT Rent-A-Trend						
WORK PHONE		EMAIL ADDRESS max.stoner@rentatrend.com								

I, Maxwell Stoner, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I, Maxwell Stoner, was travelling westbound on 20th St. SE approaching the intersection at S. Lk. Stevens Rd. when a tan minivan turned from my right side of the intersection onto westbound 20th St SE. It initially appeared that the van was going to remain in the right hand lane leaving a path clear for me on my motorcycle. But the driver took a wide turn and came into the left lane forcing me to slam on my brakes and glance the right side of my motorcycle off of her driver's side rear quarter. I was then unable to control the motorcycle and ended up dumping the bike onto it's right side. The driver of the van and two witnesses stopped to help me.

LSPD
ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 8/05/13	LOCATION SIGNED Ton Thum
OFFICER/NUMBER #101	DATE SIGNED 8/5/13	LOCATION SIGNED LAKE STEVENS, WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

13 01925

VICTIM / WITNESS

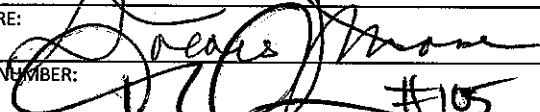
NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Morse Dolores J	RACE	ETH	SEX	DOB 4/13/48	AGE	HGT	WGT	HAIR	EYES
STREET ADDRESS		CITY		STATE		ZIP	RES. STATUS			
HOME PHONE 540 245 0945		CELL PHONE			PLACE OF EMPLOYMENT					
WORK PHONE		EMAIL ADDRESS								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEM(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

At the intersection I was preparing to turn right. Traffic approaching from the right was turning left in front of me. There were 5 or 6 cars turning so I moved forward & turned right. The next thing I knew I thought I lost a tire off my car. I had no idea what happened.

I had cut off a motorcycle that was approaching from the left. I have been told that the turning lane had a flashing yellow light not a green light so they yielded to traffic coming straight. That's where I am told the motorcycle came from.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 8/5/13	LOCATION SIGNED LAKE STEVENS, WA
OFFICER/NUMBER: #105	DATE SIGNED	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE ___ OF ___

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

13-019785

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) <u>Kevin P. Durand</u>	RACE <u>W</u>	ETH	SEX <u>M</u>	DOB <u>01/14/77</u>	AGE <u>36</u>	HGT <u>6</u>	WGT <u>160</u>	HAIR <u>Brown</u>	EYES <u>Blue</u>
STREET ADDRESS <u>473 103rd Ave NE</u>		CITY <u>Lake Stevens</u>		STATE <u>WA</u>		ZIP <u>98258</u>		RES. STATUS		
HOME PHONE <u>206-962-1335</u>		CELL PHONE <u>SAME</u>		PLACE OF EMPLOYMENT <u>Boring</u>						
WORK PHONE <u>SAME</u>		EMAIL ADDRESS								

I, Kevin Durand, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

The motorcycle was moving West on 20th. The van made a right hand turn from South Lake Stevens road onto 20th and cut in front of the motorcycle who had a green light. The bike hit the left side of the van and fell onto the right side of the bike. I ~~stopped~~ was making a left turn onto Lake Stevens road from 20th and saw the accident in my mirror.

ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>Kevin Durand</u>	DATE SIGNED <u>8/5/13</u>	LOCATION SIGNED <u>Lake Stevens WA</u>
OFFICER/NUMBER: <u>#105</u>	DATE SIGNED <u>8/5/13</u>	LOCATION SIGNED <u>LAKE STEVENS, WA</u>

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

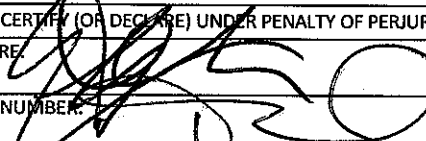
13.01925

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Miller Erin Marie	RACE W	ETH W	SEX F	DOB 06/25/1985	AGE 28	HGT 5'3"	WGT 115	HAIR BRN	EYES BLU
STREET ADDRESS 20225 Bothell Everett Hwy #138		CITY Bothell		STATE WA		ZIP 98012		RES. STATUS US		
HOME PHONE NA		CELL PHONE 425-220-2504		PLACE OF EMPLOYMENT US FDA						
WORK PHONE 425-402-3183		EMAIL ADDRESS Erinmiller@gmail.com								

I, Erin Miller, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was heading east on 20th street, approached the intersection of 20th & S. Lake Stevens Road. I was in the left hand turn lane waiting to take a left on a flashing yellow. my friend took a left, motorcycle heading westbound on 20th was cut off by a lady in gray van. motorcycle went down behind my black car. He missed my car, went down to his left side. I got out to check if he was okay, lady did not realize she had cut him off. She said she didn't see him. I am the one to call the cops.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT			
SIGNATURE 		DATE SIGNED 8/5/13	LOCATION SIGNED Lake Stevens
OFFICER/NUMBER #105		DATE SIGNED 8/5/13	LOCATION SIGNED LAKE STEVENS, WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

Incident History for: #SS13017532 Xref: #HH13008345 #AG13002229
Case Numbers: \$SS13001925
Received 08/05/13 11:39:16 BY SPCT04 SP0141
Entered 08/05/13 11:39:57 BY SPCT04 SP0141
Dispatched 08/05/13 11:40:42 BY SPDP17 SP0368
Enroute 08/05/13 11:40:42
Onscene 08/05/13 11:41:52
Closed 08/05/13 12:25:00

Initial Type: 911 Initial Alarm Level: Final Alarm Level:
Final Type: ACCP (ACCIDENT, PRIORITY) Pri: 1 Dispo: H
Police BLK: SS003 Fire BLK: AG1319 Map Page: 397F-4 Group: SS1 Beat: SOUT
Src: 9
Loc: 1920 S LAKE STEVENS RD ,LKS -- TOM THUMB GROCERY ,LKS btwn S DAVIES RD & 2
0 ST SE (V)
Latitude: (+) 47.978271 Longitude: (-) 122.091644

Loc Info:

Name:	Addr:	Phone:
/1139 (SP0141) ENTRY	, WPH2 - OPEN LINE, NOTHING HEARD, NEG ON TTY/ VC OCB COF: 19	
/1140 (SP0368) DISPER SS1912	#SS79 SUMMERS, SGT (ROBERT)	
/1141 (SP0279) SUPP	LOC: 1920 S LAKE STEVENS RD ,LKS, TXT: MC DOWN, RIDER IS MOVING AROUND, NON BLOCKI NG	
/1141 CHANGE	LOC: 20 ST SE/S LAKE STEVENS RD ,LKS --> 1920 S LAKE STEVENS RD ,LKS, LOCI: VERIZON, --> , TYP: 911 --> ACCP, PHO: 4252202564 --> , RSP: PP --> TP, PRI: 2 --> 1	
/1141 (SP0368) ASSTER SS1933	#SS102 PLANALP, OFFICER (DANIEL)	
/1141 ASSTOS SS1936	#SS105 IRWIN, OFFICER (DENNIS)	
/1143 MISC SS1936	, AID 36YO MALE CABN ABRASIONS AND LEG PAIN	
/1144 (*****) REMINQ SS1936	AKG1014	
/1144 (SP0368) REMINQ SS1936	LIC, 1936, AKG1014, , ,	
/1144 (SS102) REMINQ SS1933	MDTVEH, AKG1014, , , WA, , , , , , , , , , ,	
/1144 (*****) REMINQ SS1936	1C8411	
/1144 (SP0368) REMINQ SS1936	LIC, 1936, 1C8411, , ,	
/1144 (SS102) REMINQ SS1933	MDTVEH, 1B8411, , , WA, , , , , , , , , , ,	
/1144 REMINQ SS1933	MDTVEH, CB8411, , , WA, , , , , , , , , , ,	
/1144 REMINQ SS1933	MDTVEH, 1C8411, , , WA, , , , , , , , , , ,	
/1144 REMINQ SS1933	MDTWANT, , , , , , , , , , , WA, HENDREJ111KU, , , , , , , , , , ,	
/1145 (SP0368) CROSS	#AG13002229	
/1146 SUPP	TXT: PER OFCR CABN 36YO M ABRASIONS AND LEG PX	
/1146 CLEAR SS1912		
/1146 CLEAR SS1933		
/1150 ASNCAS SS1936	\$SS13001925	
/1225 CLEAR SS1936	D/H	
/1225 CLOSE SS1936		
/1609 CROSS	#HH13008345	

1000
ORIGINAL